



PTO/SB/81 (01-06)

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INDICATION FORM**

Application Number	10/619,510
Filing Date	16 July 2003
First Named Inventor	Robert MAERZ
Title	Method and system for offering secu
Art Unit	3693
Examiner Name	J. Alpert
Attorney Docket Number	044129-002000

I hereby revoke all previous powers of attorney given in the above-identified application.

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☒ Applicant/Inventor.☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record**

Signature		Date	11/30/06
Name	Robert Maerz	Telephone	(825) 729-3682
Title and Company	Applicant/Inventor		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ *Total of 2 forms are submitted.

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SIGNATURE of Applicant or Assignee of Record

Signature	<i>Ernest Sjo</i>	Date	11-6-06
Name	Ernest Sjo	Telephone	714-323-5697
Title and Company	Applicant/Inventor		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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